

AUTO CR - LOG SUMMARY #1070699

TYPE: CR

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
	(None Entered)		

Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD Reporting Party Victim						F			

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
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Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
CPD Employee Accused	UNKNOWN,					ON Duty	THE REPORTING PARTY STATES THAT SHE AND HER HUSBAND WERE INVOLVED A TRAFFIC ACCIDENT AND THEY CALLED THE POLICE. SHE ALLEGES THAT THE ACCUSED OFFICER FAILED TO ASSIST THEM AND INFORMED THEM THAT SINCE THEIR DAMAGES WERE LESS THAN \$1,500.00 THEY SHOULD EXCHANGE INFORMATION AND GO THROUGH THEIR INSURANCE.

Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD Victim/Subject						M			

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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Incident Details

CR Required?		Manner Incident Received?	INTERNET
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
10U - GROUP 10 - OPERATION/PERSONNEL VIOLATIONS (ON DUTY) INADEQUATE / FAILURE TO PROVIDE SERVICE	Y	Y

Incident Category List

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
CALLAHAN, LISA	Primary	DISTRICT/UNIT	06-JAN-2015	05-FEB-2015		1653
CALLAHAN, LISA	Primary	DISTRICT/UNIT	01-OCT-2014	31-OCT-2014	06-JAN-2015	97

Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED/FINAL	14-JAN-2015 12:42	GRAY, ALICE	SR DATA ENTRY OPR	121 /	
PENDING REVIEW INCIDENT (I.A.D./DISTRICT USE)	06-JAN-2015 10:31	JOHNSON/WALKER, PATRICIA	SR DATA ENTRY OPR	121 /	
PENDING INVESTIGATION	06-JAN-2015 08:56	MARKHAM, DINA	POLICE OFFICER	121 /	 Type Changed from INFO to CR on 06-JAN-2015 08:56 by MARKHAM, DINA
PENDING ASSIGN INVESTIGATOR	06-JAN-2015 08:56	MARKHAM, DINA	POLICE OFFICER	121 /	
PENDING INVESTIGATION	01-OCT-2014 09:17	SCOTT, NIYA	PERSONAL COMP OPER 2	121 /	
PENDING ASSIGN INVESTIGATOR	23-SEP-2014 09:21	CLARK, SUSAN	LIEUTENANT OF POLICE	121 /	
PENDING APPROVE TEAM	12-SEP-2014 01:35	WATSON, JOHN	POLICE OFFICER	121 /	No PCAD for above address
PENDING ASSIGN TEAM	31-JUL-2014 08:42	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	31-JUL-2014 08:22	STEWART, DENISE	INTAKE AIDE	113 /	
PRELIMINARY	31-JUL-2014 08:07	STEWART, DENISE	INTAKE AIDE	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					STEWART, DENISE	31-JUL-2014 08:07			
	DOCUMENTS - INTAKE INCIDENT		2	#11875	N	STEWART, DENISE	31-JUL-2014 08:22	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 31-JUL-2014) - LOG #1070699

TYPE: CR

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD	Reporting Party Victim						F			

Incident Information

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Accused Members

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CPD Employee	Accused	UNKNOWN,					ON Duty	THE REPORTING PARTY STATES THAT SHE AND HER HUSBAND WERE INVOLVED A TRAFFIC ACCIDENT AND THEY CALLED THE POLICE. SHE ALLEGES THAT THE ACCUSED OFFICER FAILED TO ASSIST THEM AND INFORMED THEM THAT SINCE THEIR DAMAGES WERE LESS THAN \$1,500.00 THEY SHOULD EXCHANGE INFORMATION AND GO THROUGH THEIR INSURANCE.

Incident Details

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Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
10U - GROUP 10 - OPERATION/PERSONNEL VIOLATIONS (ON DUTY) INADEQUATE / FAILURE TO PROVIDE SERVICE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IAD	DISTRICT/UNIT	CALLAHAN, LISA (PRIMARY INV)	06-JAN-2015 08:56	MARKHAM, DINA	
IAD	DISTRICT/UNIT	CALLAHAN, LISA (PRIMARY INV)	01-OCT-2014 09:17	SCOTT, NIYA	
IAD	DISTRICT/UNIT	-	12-SEP-2014 13:35	WATSON, JOHN	
IAD	INTERNAL AFFAIRS DIVISION	-	31-JUL-2014 20:07	STEWART, DENISE	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
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COMPLAINT [REDACTED]

YOUR PERSONAL INFORMATION

Complaint ID : [REDACTED]
Name : [REDACTED]
Race : UNKNOWN Sex : FEMALE
Address : [REDACTED] Age : 43

Your contact information

Best time to contact : 06:00 PM
Primary Contact Phone Number : [REDACTED]
E-mail Address : [REDACTED]

Your injury information

Were you injured in this incident? YES

WE WERE INVOLVED IN A CAR ACCIDENT WHERE OUR VEHICLE WAS HIT FROM BEHIND. AS A RESULT I
Please describe the injury : HAVE BEEN SEEKING MEDICAL TREATMENT AND PHYSICAL THERAPY FOR BACK AND NECK INJURIES.

Did you need medical attention? NO

Hospital/Medical Center :

Please describe the medical treatment :

INFORMATION ABOUT THE INCIDENT

Description of the incident : AT AROUND 4PM ON JUNE 22, 2014, WE ENTERED THE EXPRESSWAY I90 FROM RIVER ROAD HEADING IN THE OPPOSITE DIRECTION OF AIRPORT. WE CAME TO STANDSTILL DUE TO TRAFFIC. NOT EVEN 2 MINUTES WHILE STILL WE WERE SUDDENLY SLAMMED FROM BEHIND. AS MY HUSBAND LOOKS IN THE REAR VIEW MIRROR THE DRIVER WAS LOOKING AT HIS CELL PHONE. MY HUSBAND GETS OUT OF THE CAR AND THE OTHER DRIVER IMMEDIATELY ATTEMPTS TO OFFER MY HUSBAND \$50 AND ASKS THAT WE NOT CALL THE POLICE AS HE HAD AN EXPIRED DRIVER'S LICENSE. BECAUSE HIS LICENSE WAS EXPIRED WE CHOSE TO CALL THE POLICE CONCERNED HE ALSO DID NOT HAVE VALID INSURANCE. WHEN MY HUSBAND CALLED 911 HE EXPLAINED WHAT HAPPENED, GAVE THE DISPATCHER OUR LOCATION AND HIS MOBILE NUMBER. AN HOUR LATER WE ARE STILL WAITING, MY HUSBAND CALLS BACK AND THE RESPONSE WAS THAT SOMEONE CAME OUT, COULD NOT FIND US SO THEY LEFT. THEY SAID THEY WOULD SEND SOMEONE ELSE OUT AND AGAIN ASKED WHERE WE WERE. MY HUSBAND EXPLAINED AND THE DISPATCHER PROCEEDED TO SAY "THAT IS THE JURISDICTION OF STATE POLICE NOT CPD." THEN TRANSFERRED US. STATE POLICE ARGUED THAT IT WAS NOT THEIR JURISDICTION AND THAT OF CPD SO BEFORE TRANSFERRING US AGAIN, DIALED CPD AND THEY BEGAN TO HAVE A DISCUSSION ABOUT THE JURISDICTION UNTIL FINALLY THEY TOLD US THEY WOULD SEND SOMEONE OUT. HALF HOUR LATER A CPD CAR PULLS UP, THE OFFICER STEPS OUT OF VEHICLE, EXAMINES BOTH CARS AND TELLS MY HUSBAND AND THE OTHER DRIVER THAT SINCE THE DAMAGES ARE LESS THAN \$1,500 WE SHOULD SIMPLY EXCHANGE INFORMATION AND GO THROUGH OUR INSURANCE. MY HUSBAND EXPLAINED TO THE OFFICER THAT BECAUSE THE OTHER DRIVER DID NOT HAVE A VALID DRIVER'S LICENSE HE WAS CONCERNED HE DID NOT HAVE INSURANCE EITHER. THE OFFICER'S RESPONSE "THAT DOESN'T MATTER EXCHANGE INFORMATION AND GO THROUGH INSURANCE" THEN HE LEFT. DRIVER DID NOT HAVE INSURANCE AND ALL IS BEING PROCESSED AND PAID FOR BY US. WE FEEL SOMETHING SHOULD HAVE BEEN DONE AND WAS NOT AND WE ARE LEFT TO PICK UP THE PIECES

Location of the incident

Street Number : Direction : Street Name : Apt No. :
Building Name : Floor : Unit :
Location Description : I90 NEAR MANHEIM

Incident Date and Time

Date : 06/22/2014 Time : 04:00 PM

Evidence

Video Evidence : NO Audio Evidence : NO

INFORMATION ABOUT THE POLICE OFFICERS

Police officer #1

Last Name : First Name : Star No. :
Rank : Assigned Unit : On Duty : YES
Sex : MALE Race : WHITE
Officer Description : WE WERE UNABLE TO GET ANY INFORMATION, EVEN WHEN I CALLED DISPATCH TO OBTAIN INFORMATION AND WAS TOLD THEY COULD NOT PROVIDE
Police Vehicle Beat Number : Vehicle Number : License Plate :
Vehicle Description :

INFORMATION ABOUT VICTIMS AND WITNESSES

Victim #1 personal information

Last Name : [REDACTED] Sex : MALE
Race : [REDACTED] Age : 45
Contact : [REDACTED]

Victim #1 injury information

Was the victim injured in this incident?: NO

Please describe the injury :

Did the victim need medical attention? NO

Hospital/Medical Center :

Please describe the medical treatment :

Victim #2 personal information

Last Name [REDACTED]

Race : [REDACTED]

Age : 22

Sex : MALE

Contact: [REDACTED]

Victim #2 injury information

Was the victim injured in this incident?: NO

Please describe the injury :

Did the victim need medical attention? NO

Hospital/Medical Center :

Please describe the medical treatment :

Victim #3 personal information

Last Name [REDACTED]

Race : [REDACTED]

Age : 43

Sex : FEMALE

Contact: [REDACTED]

Victim #3 injury information

Was the victim injured in this incident?: YES

Please describe the injury : NECK AND BACK

Did the victim need medical attention? YES

Hospital/Medical Center : CENTRAL DUPAGE HOSPITAL & MEDICAL CENTERS

Please describe the medical treatment : RECEIVED EXAM, X-RAYS, MEDICATION AND NOW GOING THROUGH PHYSICAL THERAPY